

04/30/2012

Form PTO-1594 (Rev. 03-11)  
OMB Collection 0651-0027 (exp. 03/31/2011)U.S. DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office

4-30-12

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## TRADEMARKS ONLY

To the Director of the U. S. Patent and Trademark Office: Please record the attached documents or the new address(es) below.

## 1. Name of conveying party(ies):

American Insurance Administrators, Inc.

- ☐ Individual(s)      ☐ Association  
☐ General Partnership      ☐ Limited Partnership  
☒ Corporation- State: Ohio  
☐ Other \_\_\_\_\_

Citizenship (see guidelines) \_\_\_\_\_

Additional names of conveying parties attached? ☐ Yes ☒ No

## 2. Name and address of receiving party(ies)

Additional names, addresses, or citizenship attached? ☐ Yes☒ NoName: American Insurance Administrators, LLC

Internal

Address: \_\_\_\_\_

Street Address: 3070 Riverside DriveCity: ColumbusState: OhioCountry: U.S.A. Zip: 43221

- ☐ Association      Citizenship \_\_\_\_\_  
☐ General Partnership      Citizenship \_\_\_\_\_  
☐ Limited Partnership      Citizenship \_\_\_\_\_  
☒ Corporation      Citizenship Ohio  
☐ Other \_\_\_\_\_      Citizenship \_\_\_\_\_

If assignee is not domiciled in the United States, a domestic representative designation is attached: ☐ Yes ☐ No.  
(Designations must be a separate document from assignment)

## 3. Nature of conveyance /Execution Date(s) :

Execution Date(s) February 6, 2012

- ☒ Assignment      ☐ Merger  
☐ Security Agreement      ☐ Change of Name  
☐ Other \_\_\_\_\_

## 4. Application number(s) or registration number(s) and identification or description of the Trademark.

A. Trademark Application No.(s)

76/708,164; 76/709,340; 76/709,343; 76/709,869; 76/709,871;  
76/710,331

B. Trademark Registration No.(s)

4

Additional sheet(s) attached? ☐ Yes ☒ No

C. Identification or Description of Trademark(s) (and Filing Date if Application or Registration Number is unknown):

## 5. Name &amp; address of party to whom correspondence concerning document should be mailed:

Name: James A. Hudak

Internal Address: \_\_\_\_\_

Street Address: 29425 Chagrin Blvd., Suite #304City: ClevelandState: Ohio Zip: 44122Phone Number: (216) 292-3900Fax Number: (216) 292-3930Email Address: james\_hudak@att.net

## 6. Total number of applications and registrations involved:

6

## 7. Total fee (37 CFR 2.6(b)(6) &amp; 3.41) \$165.00

- ☐ Authorized to be charged to deposit account  
☒ Enclosed

## 8. Payment Information:

Deposit Account Number: ARTIN 00000074 76708164

Authorized User Name: \_\_\_\_\_

92 FC:8522

40.00 OP

125.00 OP

## 9. Signature:

Signature

April 25, 2012

Date

James A. Hudak

Name of Person Signing

Total number of pages including cover sheet, attachments, and document:

3

Documents to be recorded (including cover sheet) should be faxed to (571) 273-0140, or mailed to:  
Mail Stop Assignment Recordation Services, Director of the USPTO, P.O. Box 1450, Alexandria, VA 22313-1450

TRADEMARK  
REEL: 004774 FRAME: 0342

## ASSIGNMENT

WHEREAS, American Insurance Administrators, Inc., an Ohio Corporation, having a principal place of business at 3070 Riverside Drive, Columbus, Ohio 43221 (hereinafter referred to as the "ASSIGNOR"), owns, has used, and is using the following marks for which registration is being sought in the United States Patent and Trademark Office:

U. S. REGISTRATION  
APPLICATION. SER. NO.

MARK

76/708,164	READYMED
76/709,340	ReadyMed Short Term Medical (STM)
76/709,343	ReadyMed
76/709,869	AlumniAD&D Accidental Death & Dismemberment
76/709,871	AlumniHIP Hospital Indemnity Plan
76/710,331	ALUMNITERM 50+

WHEREAS, American Insurance Administrators, LLC, an Ohio Limited Liability Company, having a principal place of business at 3070 Riverside Drive, Columbus, Ohio 43221 (hereinafter referred to as the "ASSIGNEE"), is desirous of acquiring said marks and the resulting registrations thereof.

NOW THEREFORE, in consideration of the sum of One Dollar (\$1.00) and other good and valuable consideration, the receipt of which is hereby acknowledged, the said ASSIGNOR does hereby assign unto the said ASSIGNEE all right, title and interest in and to said marks,

together with the goodwill of the business symbolized by said marks and the resulting registrations thereof.

IN WITNESS WHEREOF, the said ASSIGNOR has caused this instrument to be signed by a duly authorized officer thereof, this 6<sup>th</sup> day of February, 2012.

American Insurance Administrators, Inc.

By: John R. Sorrentino  
John R. Sorrentino  
Secretary

State of New York )  
County of Franklin ) ss:  
Westchester )

On this 6<sup>th</sup> day of February, 2012, before me appeared the above-named American Insurance Administrators, Inc., by John R. Sorrentino, its Secretary, who acknowledged that he did sign the foregoing instrument, and that the same is the free act and deed of said Corporation, and the free act of him personally and as such Officer of said Corporation.

IN TESTIMONY THEREOF, I have hereunto set my bond and official seal, at Briarcliff Manor, NY this 6<sup>th</sup> day of February, 2012.

**DORIS FARAGALLAH**  
Notary Public, State of New York  
No. 01FA6116333  
Qualified in Bronx County  
Commission Expires Sept. 27, 2008

Doris Faragallah  
Notary Public